FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Spear Matthew A. (Last) (First) (Middle) C/O POSEIDA THERAPEUTICS, INC. 9390 TOWNE CENTRE DRIVE, STE 200					3. E	Issuer Name and Ticker or Trading Symbol Poseida Therapeutics, Inc. [PSTX] Inc. [PSTX] Inc. [PSTX] Inc. [PSTX]								(Che	Relationship of Reporting Person(s) to Issuer Check all applicable) Director 10% Owner X Officer (give title Other (specify below) Chief Medical Officer				
(Street) SAN DII (City)	EGO C.	A !	92121 (Zip)		_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	e) X Form t Form t	Form filed by More than One Reporting Person Form form filed by More than One Reporting Person					
		Tab	le I - Nor	n-Deriv	ative	Se	curiti	ies Acc	quired,	Dis	posed o	of, or E	ene	ficiall	y Owned	t			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date,		Code (Instr. 5)			5. Amou Securiti Benefici Owned	ies Form cially (D) (Following (I) (I		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	v	Amount	(A) or P		Price		saction(s) r. 3 and 4)			`	
Common Stock 01/15/				5/2021	2021		М		7,564	64 A \$		\$1.32	2 11,485			D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,		ansaction of De Se Ad (A Di of (Irstr.)		of Ex		s. Date Exercisable and Expiration Date Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		1)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisab		xpiration ate	Title	or Nu of	umber					
Stock Option (Right to	\$1.322	01/15/2021			M			7,564	(1)	0	6/19/2026	Commo Stock	n 7	,564	\$0.00	132,86	1	D	

Explanation of Responses:

1. The stock option is fully vested and exercisable

Remarks:

/s/ Johanna Mylet, Attorney-in-01/19/2021

Fact

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

^{**} Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).